

## **PREGNANCY PREVENTION INTERVENTION IMPLEMENTATION REPORT**

**Intervention Name:** *HORIZONS*

**Developer:** Ralph J. DiClemente, PhD; Gina M. Wingood, ScD, MPH; Eve S. Rose, MSPH; Jessica M. Sales, PhD; Delia L. Lang, PhD, MPH; Angela M. Caliendo, MD, PhD; James W. Hardin, PhD; Richard A. Crosby, PhD

**Program Description:** *HORIZONS* is a culturally tailored STD/HIV intervention for African American adolescent females seeking sexual health services. The intervention aims to reduce STDs by improving STD/HIV risk-reduction knowledge and condom use skills, facilitating communication with male partners about safer sex practices and STDs, facilitating male sex partners' access to STD screening and treatment, and reducing female adolescents' frequency of douching.

### **Component 1: Group Sessions**

This component includes two group sessions (four hours each), implemented in small groups on two consecutive Saturdays. The interactive sessions are intended to foster a sense of cultural and gender pride and emphasize the diverse individual and social factors contributing to adolescents' STD/HIV risk.

### **Component 2: Vouchers**

This component includes distribution of \$20 vouchers redeemable by participants' male partner(s) toward the cost of STD services.

### **Component 3: Telephone Contacts**

This component includes a total of four (15-minute) follow-up telephone contacts, one every other month, to reinforce prevention information presented in group sessions.

**Target Population:** Available information describes the target population as African American adolescent females seeking sexual health services.

**Curriculum Materials:** Program materials are available by contacting Ralph DiClemente, Ph.D., Emory University Rollins School of Public Health at [rdiclem@emory.edu](mailto:rdiclem@emory.edu).

**Training and TA:** In the original implementation of *HORIZONS*, group sessions and phone contacts were conducted by female African American health educators.

## **Research Evidence**<sup>1</sup>

<b>Study Citation:</b>	DiClemente, R.J., Wingood, G.M., Rose, E.S., Sales, J.M., Lang, D.L., Caliendo, A.M., Hardin, J.W., & Crosby, R.A. (2009). Efficacy of sexually transmitted disease/human immunodeficiency virus sexual risk-reduction intervention for African American adolescent females seeking sexual health services. <i>Archives of Pediatric &amp; Adolescent Medicine</i> , 163 (12), 1112–1121.
<b>Population Evaluated:</b>	<p>African American females between the ages of 15 and 21 seeking services from a reproductive health clinic, who reported engaging in vaginal intercourse in the past 60 days, were single, and were not pregnant or attempting to get pregnant at the time of recruitment</p> <ul style="list-style-type: none"><li>• Average age 17.8 years</li></ul>
<b>Setting:</b>	Three clinics in downtown Atlanta, Georgia, providing sexual health services to predominantly inner-city adolescents
<b>Study Findings:</b>	Based on an average of the 6- and 12-month follow-ups: youth participating in the intervention were significantly less likely to test positive for Chlamydia and significantly more likely to report both consistent condom use and using a condom at last sex.

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<sup>1</sup> This summary of evidence is limited to studies of the intervention meeting the inclusion criteria and evidence standards for the Pregnancy Prevention Research Evidence Review. Findings from these studies include only those showing a statistically significant positive impact on sexual risk behavior or its health consequences. Studies may present other positive findings beyond those described; however, they were not considered as evidence for effectiveness because they focused on non-priority outcomes or subgroups, did not meet baseline equivalence requirements, or were based on follow-up data with high sample attrition. For additional details on the review process and standards, see the review's Technical Documentation.